

Refine Search

Search Results -

Terms	Documents
(beta blocker) and L7	2

Database:

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Search:

L8

Search History

 DATE: Tuesday, June 20, 2006 [Printable Copy](#) [Create Case](#)

<u>Set Name</u> side by side	<u>Query</u>	<u>Hit Count</u>	<u>Set Name</u> result set
<i>DB=USPT,EPAB,JPAB,DWPI; PLUR=YES; OP=ADJ</i>			
<u>L8</u>	(beta blocker) and L7	2	<u>L8</u>
<u>L7</u>	(treatment) and L5	1865	<u>L7</u>
<u>L6</u>	(idiopatheic) and L5	0	<u>L6</u>
<u>L5</u>	(cachexia or cachectic).ab.	3139	<u>L5</u>
<i>DB=PGPB,USPT,EPAB,JPAB,DWPI; PLUR=YES; OP=ADJ</i>			
<u>L4</u>	(treatment) and L2	1639	<u>L4</u>
<u>L3</u>	(treatment) and L2	1639	<u>L3</u>
<u>L2</u>	(idiopathic) and L1	1693	<u>L2</u>
<u>L1</u>	(cachexia or cachectic)	10004	<u>L1</u>

END OF SEARCH HISTORY

TABLE 1. Frequency of Weight Gain and Weight Loss

	Baseline Body Mass Index (kg/m ²)			
	<22	22-25	25-30	≥30
Weight Gain ≥5%				
Carvedilol	60/136 (44%)	63/265 (24%)	74/453 (16%)	37/232 (16%)
Placebo	30/125 (24%)	50/278 (18%)	58/430 (13%)	29/229 (13%)
HR (95% CI)*	2.20 (1.41-3.43)	1.23 (0.85-1.79)	1.11 (0.79-1.57)	1.48 (0.91-2.41)

*HR denotes carvedilol:placebo hazard ration, CI is confidence interval.

TABLE 2. Effect of Erythropoietin Analogue on Body Weight

BODY WEIGHT	
Mean (+) changes form baseline to week 27	
Placebo	-1.2 ± 0.7 kg
Darbepoetin alpha	+0.1 ± 1.1 kg

L9 ANSWER 1 OF 10 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

AN 2000094095 EMBASE

TI [Growth hormone for optimization of refractory heart failure treatment].
HORMONIO DO CRESCIMENTO NA OTIMIZACAO DO TRATAMENTO DA INSUFICIENCIA CARDIACA REFRATARIA.

AU Alcides Bocchi E.; Massuda Z.; Guimaraes G.; Carrara D.; Bellotti G.; Mocelin A.; Rodrigues Sobrinho C.R.M.; Franchini Ramires J.

CS E. Alcides Bocchi, Rua Oscar Freire, 2077/161, 05409-011 Sao Paulo, SP, Brazil

SO Arquivos Brasileiros de Cardiologia, (1999) Vol. 73, No. 4, pp. 391-398. .
Refs: 35
ISSN: 0066-782X CODEN: ABCAAJ

CY Brazil

DT Journal; Article

FS 018 Cardiovascular Diseases and Cardiovascular Surgery
037 Drug Literature Index

LA Portuguese

SL English; Portuguese

ED Entered STN: 23 Mar 2000
Last Updated on STN: 23 Mar 2000

AB It has been reported that growth hormone may benefit selected patients with congestive heart failure. A 63-year-old man with refractory congestive heart failure waiting for heart transplantation, depending on intravenous drugs (dobutamine) and presenting with progressive worsening of the clinical status and **cachexia**, despite standard treatment, received growth hormone replacement (8 units per day) for optimization of congestive heart failure management. Increase in both serum growth hormone levels (from 0.3 to 0.8 µg/l) and serum IGF-1 levels (from 130 to 300ng/ml) was noted, in association with clinical status improvement, better optimization of heart failure treatment and discontinuation of dobutamine infusion. Left ventricular ejection fraction (by MUGA) increased from 13% to 18% and to 28% later, in association with reduction of pulmonary pressures and increase in exercise capacity (rise in peak VO2 to 13.4 and to 16.2ml/kg/min later). The patient was 'de-listed' for heart transplantation. Growth hormone may benefit selected patients with refractory heart failure.

L9 ANSWER 2 OF 10 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

AN 1999392061 EMBASE

TI The impact of malnutrition on the quality of life in the elderly.

AU Vetta F.; Ronzoni S.; Taglieri G.; Bollea M.R.

CS F. Vetta, Via Emilio De Marchi 87, 00141-Rome, Italy

SO Clinical Nutrition, (1999) Vol. 18, No. 5, pp. 259-267. .
Refs: 102
ISSN: 0261-5614 CODEN: CLNUDP

CY United Kingdom

DT Journal; General Review

FS 017 Public Health, Social Medicine and Epidemiology
020 Gerontology and Geriatrics
029 Clinical Biochemistry
037 Drug Literature Index
038 Adverse Reactions Titles

LA English

SL English

ED Entered STN: 2 Dec 1999
Last Updated on STN: 2 Dec 1999

AB Matnutrition is a frequent condition, both widely represented in geriatric population and underestimated in diagnostic and therapeutic work-up, and is known to affect health status and life expectancy of elderly people. The unexpected weight loss is a pathological condition, recently classified in three different ways (sarcopenia, wasting and

cachexia) according to criteria of nutritional intake, functional abilities and age-related body composition modifications, that is caused by social psychological and medical factors. In this review, the authors highlight the ways that, through malnutrition, could lead to an impairment of quality of life in elderly people. Notwithstanding the great impreciseness and confusion that surrounds the term 'quality of life', the authors focus their attention on the correlation existing with the recently occurring changes to patients' health status and life-style, analysing the relationship with frailty, failure to thrive and homeostatic balance failure syndrome. With the latter term, the authors introduce a pathological condition widely represented in the late stages of malnutrition that often evolves in multiple organ failure and lastly in the death.

L9 ANSWER 3 OF 10 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
 AN 97233931 EMBASE
 DN 1997233931
 TI Glucocorticoidlike activity of megestrol: A summary of food and drug administration experience and a review of the literature.
 AU Mann M.; Koller E.; Murgo A.; Malozowski S.; Bacsanyi J.; Leinung M.
 CS Dr. M. Mann, Center for Drug Evaluation/Research, US Food and Drug Administration, Rockville, MD, United States
 SO Archives of Internal Medicine, (1997) Vol. 157, No. 15, pp. 1651-1656. .
 Refs: 23
 ISSN: 0003-9926 CODEN: AIMDAP
 CY United States
 DT Journal; General Review
 FS 006 Internal Medicine
 016 Cancer
 030 Pharmacology
 037 Drug Literature Index
 038 Adverse Reactions Titles
 LA English
 SL English
 ED Entered STN: 22 Aug 1997
 Last Updated on STN: 22 Aug 1997
 AB Sporadic single case reports linking glucocorticoidlike activity to megestrol acetate have been reported in the literature. These findings have important implications for patient care. Adverse drug experience reports to the US Food and Drug Administration from 1984 through 1996 and a MEDLINE search of the literature from 1984 through 1996 provided the case reports. Five cases of Cushing syndrome, 12 cases of new-onset diabetes, and 16 cases of adrenal insufficiency were identified in association with megestrol therapy. Twelve cases in which preexisting diabetes was exacerbated and 17 cases of possible adrenal insufficiency were identified. Therapy with megestrol can result in clinical manifestations of glucocorticoidlike activity, including Cushing syndrome, diabetes, and adrenal insufficiency. Clinicians need to be aware of this association as these complications can be life-threatening if not recognized.

L9 ANSWER 4 OF 10 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
 AN 96096929 EMBASE
 DN 1996096929
 TI [Cachexia, ascites and renal failure].
 KACHEXIE, ASZITES UND NIERENVERSAGEN.
 AU Sieber C.; Moschopoulos M.; Favre G.; Dalquen P.
 CS Abteilung fur Gastroenterologie, Kantonsspital, 4031 Basel, Switzerland
 SO Schweizerische Rundschau fur Medizin/Praxis, (1996) Vol. 85, No. 13, pp. 411-415. .
 ISSN: 0369-8394 CODEN: SRMPDJ
 CY Switzerland

DT Journal; Article
FS 003 Endocrinology
005 General Pathology and Pathological Anatomy
028 Urology and Nephrology
048 Gastroenterology
037 Drug Literature Index

LA German

ED Entered STN: 30 Apr 1996

Last Updated on STN: 30 Apr 1996

L9 ANSWER 5 OF 10 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

AN 96297098 EMBASE

DN 1996297098

TI Palliative management of the patient with advanced pancreatic cancer.

AU Walsh D.

CS Palliative Care Program, Cleveland Clinic Cancer Center, 9500 Euclid Ave., Cleveland, OH 44195, United States

SO ONCOLOGY, (1996) Vol. 10, No. 9 SUPPL., pp. 40-44. .

ISSN: 0890-9091 CODEN: OCLGE

CY United States

DT Journal; Conference Article

FS 016 Cancer

037 Drug Literature Index

LA English

SL English

ED Entered STN: 28 Oct 1996

Last Updated on STN: 28 Oct 1996

AB For the patient with advanced pancreatic cancer, curative strategies may not be appropriate, and palliative symptom management may be the best approach to patient care. Oncologists, who have been trained to concentrate on curing cancer, must shift focus when caring for these patients and consider palliative treatment strategies. Pancreatic cancer patients are multisymptomatic and may require treatment for such conditions as pain, bowel obstruction, anorexia, early satiety, **cachexia**, nausea and vomiting, constipation, diarrhea, ascites, and dyspnea, among others. These patients may be most effectively managed in a hospice care center, which can provide comprehensive care. Alternatively, new programs, such as the Cleveland Clinic Palliative Care Program, provide a unique setting for the patient with advanced cancer that integrates the qualities of hospice care into the acute medical care system.

L9 ANSWER 6 OF 10 CAPLUS COPYRIGHT 2006 ACS on STN

AN 1995:735554 CAPLUS

DN 123:102803

TI Use of β -adrenergic agonists for treating loss of function of striated muscles

IN Maltin, Charlotte

PA Rowett Research Institute, UK

SO Eur. Pat. Appl., 45 pp.

CODEN: EPXXDW

DT Patent

LA English

FAN.CNT 2

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	EP 662324	A1	19950712	EP 1995-101362	19880912
	R: AT, BE, CH, DE, ES, FR, GB, GR, IT, LI, LU, NL, SE				
	EP 308157	A2	19890322	EP 1988-308402	19880912
	EP 308157	A3	19920115		
	EP 308157	B1	19970226		
	R: AT, BE, CH, DE, ES, FR, GB, GR, IT, LI, LU, NL, SE				
	US 5541188	A	19960730	US 1995-426890	19950424

PRAI	GB 1987-21602	A	19870915
	GB 1988-3619	A	19880217
	EP 1988-308402	A3	19880912
	US 1987-133702	B2	19871216
	EP 1988-30840	A	19880912
	US 1988-266973	B1	19881103
	US 1992-827839	B3	19920129

AB This invention relates to novel therapeutic uses of β -adrenergic agonists in humans and animals. The uses include increasing muscle growth and reducing fat uptake from dietary input, retarding or reversing atrophy of denervated muscle, alleviating or reversing the effects of various diseases (including cancer), modification of fetal and neonatal growth, and possible genetic modifications of the developing fetus. The preferred β -adrenergic agonist is clenbuterol. The β -adrenergic agonist can be mixed with a β -adrenergic antagonist to obviate or mitigate unwanted side effects without excessively inhibiting the wanted novel effects.

L9 ANSWER 7 OF 10 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

AN 92286726 EMBASE

DN 1992286726

TI Malnutrition in the institutionalized older adult.

AU Kerstetter J.E.; Holthausen B.A.; Fitz P.A.

CS School of Allied Health Professions, University of Connecticut, Storrs, CT 06269-2101, United States

SO Journal of the American Dietetic Association, (1992) Vol. 92, No. 9, pp. 1109-1116.

ISSN: 0002-8223 CODEN: JADAAE

CY United States

DT Journal; Article

FS 017 Public Health, Social Medicine and Epidemiology
 020 Gerontology and Geriatrics
 037 Drug Literature Index
 038 Adverse Reactions Titles

LA English

SL English

ED Entered STN: 25 Oct 1992

Last Updated on STN: 25 Oct 1992

AB Most older adults in the United States live at home and are well nourished. Approximately 5% to 6% reside in nursing homes, and this segment of the older population typically suffers from multiple diseases that contribute to a high incidence of malnutrition. Forty percent of hospital beds are occupied by older persons. This article addresses the causes of malnutrition in older persons institutionalized in long-term and acute-care facilities. The causes include changes in nutrient requirements secondary to disease processes and drug modalities in combination with low or marginal dietary intake. Infections are common and result in anorexia, poor dietary intake, and malnutrition, which predispose the patient to another infection. Occurrence of decubitus ulcers is related to nutritional status and presents a serious risk for older persons with limited mobility. Depression and dementia are commonly seen in older persons and are major contributors to poor appetite and malnutrition. Cancer **cachexia** accounts for about half of the cases of malnutrition in older institutionalized persons. Physiologic changes that occur with age and multiple drug use place older persons at a high risk for adverse drug reactions. Less body water in the older individual influences and complicates many aspects of treatment. Standards, methods, and interpretation of nutritional assessment measurements in older persons differ from those in younger adults. The nutrition care provider must carefully consider many complex physical, medical, and psychosocial factors to deliver individualized nutrition care.

L9 ANSWER 8 OF 10 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
 AN 90166703 EMBASE
 DN 1990166703
 TI Cardiac **cachexia**: An overview.
 AU Heymsfield S.B.
 CS Division of Endocrinology/Nutrition, Department of Medicine, St. Luke's-Roosevelt Hospital, New York, NY 10025, United States
 SO Nutritional support in organ failure: proceedings of the International Symposium. ICS836, (1990) pp. 37-44. .
 Conference: The International Symposium, Osaka, JAPAN, 21 NOV 1988 - 23 NOV 1988 Editor: Tanaka T.; Okada A. Publisher: Elsevier Science Publishers B.V.
 ISBN: 0444811613
 DT Conference; Conference Article
 FS 006 Internal Medicine
 018 Cardiovascular Diseases and Cardiovascular Surgery
 037 Drug Literature Index
 LA English
 ED Entered STN: 13 Dec 1991
 Last Updated on STN: 13 Dec 1991

L9 ANSWER 9 OF 10 CAPLUS COPYRIGHT 2006 ACS on STN
 AN 1990:112090 CAPLUS
 DN 112:112090
 TI Therapeutic applications of beta-adrenergic agonists: anabolic effects on skeletal muscle and catabolic effects on body fat
 IN Maltin, Charlotte Anne; Reeds, Peter John; Delday, Margret Inkster; Hay, Susan Mary; Smith, Frazer George; Lobley, Gerald Edward; Dorward, Patricia Margret; Palmer, Robert Michael
 PA Rowett Research Institute, UK
 SO Eur. Pat. Appl., 47 pp.
 CODEN: EPXXDW

DT Patent
 LA English

FAN.CNT 2

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	EP 308157	A2	19890322	EP 1988-308402	19880912
	EP 308157	A3	19920115		
	EP 308157	B1	19970226		
	R: AT, BE, CH, DE, ES, FR, GB, GR, IT, LI, LU, NL, SE				
	EP 662324	A1	19950712	EP 1995-101362	19880912
	R: AT, BE, CH, DE, ES, FR, GB, GR, IT, LI, LU, NL, SE				
	AT 149089	E	19970315	AT 1988-308402	19880912
	ES 2100148	T3	19970616	ES 1988-308402	19880912
	US 5530029	A	19960625	US 1995-426888	19950424
	US 5541188	A	19960730	US 1995-426890	19950424
	US 5552442	A	19960903	US 1995-427663	19950424
PRAI	GB 1987-21602	A	19870915		
	GB 1988-3619	A	19880217		
	US 1987-133702	B2	19871216		
	EP 1988-30840	A	19880912		
	EP 1988-308402	A3	19880912		
	US 1988-266973	B1	19881103		
	US 1992-827839	B3	19920129		

AB A β -adrenergic agonist, preferably clenbuterol, is useful for increasing the growth of innervated muscle, reducing fat uptake from dietary input, retarding or reversing atrophy of denervated muscles, alleviating or reversing the effects of various diseases (including cancerous **cachexia**, muscular dystrophy, neurol. and wasting diseases), modifying fetal and neonatal growth, and possibly genetically modifying the developing fetus (especially to prevent muscular dystrophy) in humans and animals. Clenbuterol markedly increased the mass of leg

muscles in rats; orciprenaline and isoetharine produced lesser effects. Isoetharine and salbutamol increased cardiac mass in rats. Terbutaline and reproterol reduced hepatic mass. Orciprenaline and isoetharine increased body protein mass in rats, although not as effectively as clenbuterol. Terbutaline and orciprenaline reduced body fat mass in rats, but not as effectively as clenbuterol. The undesirable side effects of the β -adrenergic agonists with anabolic properties were counteracted by simultaneous administration of a (preferably mixed) β -adrenergic antagonist without terminating all the therapeutic properties of the β -adrenergic agonist; the preferred combination was clenbuterol and propranolol.

L9 ANSWER 10 OF 10 MEDLINE on STN
 AN 68082373 MEDLINE
 DN PubMed ID: 6063335
 TI [Metabolic balance in patients with cardiac **cachexia**].
 Bilans metaboliczny u chorych z wyniszczeniem sercowym.
 AU Roguski J; Hasik J; Hryniewiecki L; Roguska J; Grala T; Makowska K
 SO Polskie archiwum medycyny wewn trznej, (1967) Vol. 39, No. 3, pp. 343-54.
 Journal code: 0401225. ISSN: 0032-3772.
 CY Poland
 DT Journal; Article; (JOURNAL ARTICLE)
 LA Polish
 FS Priority Journals
 EM 196801
 ED Entered STN: 1 Jan 1990
 Last Updated on STN: 1 Jan 1990
 Entered Medline: 28 Jan 1968

=> file stnguide

COST IN U.S. DOLLARS

SINCE FILE	TOTAL
ENTRY	SESSION
60.32	60.95

FULL ESTIMATED COST

DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)

SINCE FILE	TOTAL
ENTRY	SESSION
-3.00	-3.00

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(FILE 'HOME' ENTERED AT 08:49:45 ON 20 JUN 2006)

FILE 'MEDLINE, CAPLUS, EMBASE, BIOSIS' ENTERED AT 09:02:54 ON 20 JUN 2006

L1	15885 S (CACHEXIA OR CACHECTIC)
L2	76 S L1 AND (IDIOPATHIC)
L3	0 S L2 AND (BETA BLOCKER)
L4	5 S L1 AND (BETA BLOCKER)
L5	3 DUP REM L4 (2 DUPLICATES REMOVED)
L6	65 S L1 AND (CARVEDILOL OR ATENOLOL OR SPIRONOLACTONE)
L7	56 DUP REM L6 (9 DUPLICATES REMOVED)
L8	10 S L7 NOT PY > 1999
L9	10 DUP REM L8 (0 DUPLICATES REMOVED)